New Association of Friends

Geoffrey Sawyer Scholarship Application

(For African American Students only)

Please fill out forms and mail to the address on page three no later than May 1, 2020 for consideration for the September 2022-June 2023 school year. Include a current picture, transcripts, and last year's income tax form. Failure to send any of these papers will disqualify you for consideration for funds.

Name	sex () Female () Male	
(first, Mido	dle, Last)	
Address		
Date of birth	Phone Number	
E-mail address	Cell Phone #	
Marital Status () Single () Marrie	ed () Divorced/Separated () Widowed	
Legal Guardian/Parents	-	
Occupation of father		
Occupation of Mother	-	
Name/ Address Of home church		
Student Educational Background		
High School	Graduation Year	
City and State		

College (s) attended (Lis	t most recent first)	
Name of College	Dates attended	Hours completed
Current College Univers	ity Information	
<u>Current College Univers</u>	ity information	
Name of College where	Geoffrey Sawyer Scholarship F	und will be applied:
Have you been accepted	d by this institution? () yes () no
If no, when will you be	notified of admission?	
Check appropriate box	of status for fall 2022: () Fresh	man, () Sophomore,
() Junior, () Senior		
Degree Program and int	ended major:	
Expected date of Gradu	ation:	_
College Cost and Financ	ial Resources:	
Total cost for the 2022-2	2023 academic year:	
(Include tuition/fees/ro	om and board if applicable)	
Total amount expected	from your parents/guardians _	
Financial aid available f	om other sources (scholarship	os, grants etc)
Amount expected from	your own resources (jobs etc)	
Amount requested from	Geoffrey Sawyer Scholarship	Fund

about yourself, your educational goals, and the reason for applying for this Scholarship. Include any information you would like the committee to know. PLEASE INCLUDE THREE PERSONAL REFERENCES FROM TEACHERS, PASTORS OR OTHERS WHO KNOW YOU WELL. DEADLINE AND RETURN ADDRESS: COMPLETE THE CHECKLIST AND SEND ALL MATERIALS POSTMARKED AND MAILED NO LATER THAN May 1, 2022 to: I _____ affirm that I am African American.____ Sign your name above date **Application Checklist:** () The application for fully completed, signed and dated () attached recent picture of yourself () 3 Personal References () High School transcript and any college transcripts you may have earned. These should be directly mailed to us in sealed envelope from the institution. Date transcript was requested from your high school Please note that we must receive transcript by May 1st deadline. () Form 1040 Federal Income tax Return for 2021, on taxes due for that year. Enclose a copy of the form completed by your parents, legal guardian (or whoever is financially responsible for you as a dependent)

Mail all items to the address given on page three.

PERSONAL STATEMENT: Please enclose on a separate sheet a brief statement